Case No. _____

RULE 63 (37 C.F.R. 1.63) DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

I am the	e original, first and sole inv	eby declare that my residence entor (if only one name is list nd for which a patent is sougl	ed below) or an ori	ginal, first and joint				
"Trans	sportable Photographi	ic booth"						
	cification of which (check as attached hereto	applicable box(s)):		-				
	was filed on		as U.S. Applic	ation Serial No.				
	was filed as PCT Internation	nal application No	— PCT/IT2003/0	_	on 6 O	ctober 200	3	
		application) was amended on			<u> </u>	0.000. 200		
u (ii .		application, mas amongot on						· · · · · · · · · · · · · · · · · · ·
amenda 37 C.F. below a priority	ment referred to above. I a R. 1.56. I hereby claim for and have also identified bel	d and understand the content acknowledge the duty to disclereign priority benefits under 3 low any foreign application fo is claimed, before the filing d	ose information wh 5 U.S.C. 119/365 or r patent or inventor	ich is material to the of any foreign applicated 's certificate having	e patental ation(s) fo	bility of this or patent or	application inventor's	on in accordance with s certificate listed
Applica	ation Number		Country			Day/	Month/Ye	ar Filed
I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below. Application Number Date/Month/Year Filed I hereby claim the benefit under 35 U.S.C. 120/365 of all prior United States and PCT international applications listed above or below and, insofar as the subject matter of each of the claims of this application is not disclosed in such prior applications in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose material information as defined in 37 C.F.R. 1.56 which occurred between the filing date of the prior applications and the national or PCT international filing date of this application:								
арриоа	and the national of t	or manufacturining date of	тио арриоатот.					
	J.S./PCT Application(s): ation Serial No.		Day/Month/Yea	Filed			F	Status: patented pending, abandoned
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. And I hereby appoint NIXON & VANDERHYE P.C., 1100 North Glebe Rd., 8 th Floor, Arlington, VA 22201-4714, telephone number (703) 816-4000 (to whom all communications are to be directed), and the following attorneys thereof (of the same address) individually and collectively my attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith and with the resulting patent: Arthur R. Crawford, 25327; Larry S. Nixon, 25640; Robert A. Vanderhye, 27076; James T. Hosmer, 30184; Robert W. Faris, 31352; Richard G. Besha, 22770; Mark E. Nusbaum, 32348; Michael J. Keenan, 32106; Bryan H. Davidson, 30251; Stanley C. Spooner, 27393; Leonard C. Mitchard, 29009; Duane M. Byers, 33363; Jeffry H. Nelson, 30481; John R. Lastova, 33149; H. Warren Burnam, Jr. 29366; Thomas E. Byrne, 32205; Mary J. Wilson, 37955; J. Scott Davidson, 33489; Alan M. Kagen, 36178; William J. Griffin, 31260; Robert A. Molan, 29834; B. J. Sadoff, 36663; James D. Berquist, 34476; Updeep S. Gill, 37334. Inventor's Signature:								
	Inventor's Signature: Inventor:	Roberto	1 1	POC	CACCI	. Date. ·	1	Italian
	inventor.	(first)	MI MI		ast)			(citizenship)
	Residence: (city)	Rome RM	IVII	(state/country)	Italy			(Citizeriship)
	Post Office Address:	Vale degli Eroi di Cefaloni	a. 123	(0.0.0.000))	- rung			
	(Zip Code)	00128	<u> </u>			-		
	Inventor's Signature:					Date:	··· - ··· -	
	Inventor:			* - *				
		(first)	MI	()	ast)			(citizenship)
	Residence: (city) Post Office Address: (Zip Code)			(state/country)				(0.000)
Inventor's Signature:			, ,			Date: _		
	Inventor:	(5)			10			4.00
	Residence: (city) Post Office Address:	(first)	MI	(I (state/country)	ast) 	-		(citizenship)
	(Zip Code)							
FOR A	ADDITIONAL INVEN	TORS, check box an	d attach sheet wi	th same informati	ion and s	ignature a	ınd date f	for each.

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	Application Number	To be Assigned		
	Filing Date	March 15, 2006		
	First Named Inventor	Roberto BOCCACCI		
	Art Unit			
	Examiner Name			
	Attorney Docket Number	2818-259		

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	Assignee of record of the entire interest. Statement under 37 C.F.R. § 3.73(b) is enclosed. (Form PTO/SB/96)/					
\boxtimes	Attorney or agent of record. Registration Number 25,327					
	Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See C.F.R. § 1.33(a)(1). Registration Number:					
Signature Uta Lluff						
Typed or Printed Name Arthur R. Crawford						
Date		March 15,	, 2006	Telephone 703	-816-4006	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*						

This collection of information is required by 37 C.F.R. § 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S. C. 122 and 37 C.F.R. § 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS: SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

BOCCACCI Atty. Ref.: 2818-259; Confirmation No.

Appl. No. To be Assigned TC/A.U.

Filed: March 15, 2006 Examiner:

For: TRANSPORTABLE PHOTOGRAPHIC BOOTH

March 15, 2006

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Sir:

<u>IDENTIFICATION OF PRACTITIONERS TO BE RECOGNIZED</u>

Of the Patent Practitioners identified in the concurrently filed Power of Attorney, please recognize the following listed Patent Practitioners as being of record in the above-identified application/patent.

Listing of Practitioners of Record (No more than 10)

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Respectfully submitted,

NIXON & VANDERHYE P.C.

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